



RCE
IPW

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.

BY: [Signature] Date: 12/14/05

MAIL STOP RCE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of: :
William T. Gurnee *et al.* :
Conf. No.: 6477 : Group Art Unit: 3743
Appln. No.: 10/087,042 : Examiner: Aaron J. Lewis
Filing Date: February 28, 2002 : Attorney Docket No.: 383-9U1

Title: HYPERBARIC OXYGEN THERAPY SYSTEM CONTROLS

**AFTER FINAL REQUEST FOR CONTINUED EXAMINATION (RCE)
UNDER 37 C.F.R. 1.114**

This is a request under 37 CFR 1.114 for continued examination (RCE) of the above identified application in response to the Office Action mailed June 14, 2005. Enclosed are the following in support of the RCE under 37 C.F.R. 1.114:

- ☐ Enter the unentered Amendment previously filed on under 37 CFR 1.116 in the above application.
- ☒ An Amendment.
- ☐ An Information Disclosure Statement, PTO/SB/08A and cited references.
- ☐ New formal drawings.
- ☒ A Petition for Extension of Time to December 14, 2005 for the pending application.
- ☐ Other:

The following fees are enclosed:

- ☒ RCE fee of \$395.00 required under 37 C.F.R. 1.17(e).
- ☐ Extension of time fee in the amount of \$____.00

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395.00 OP

☐ Additional claim fees of _____ for excess claims submitted in the enclosed
Amendment, calculated as follows:

					SMALL ENTITY		LARGE ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	23	(-)	34	0	x25		x50	
INDEP.	6	(-)	9	0	x100		x200	
<input type="checkbox"/> 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					+\$180		+\$360	
					TOTAL	0	TOTAL	

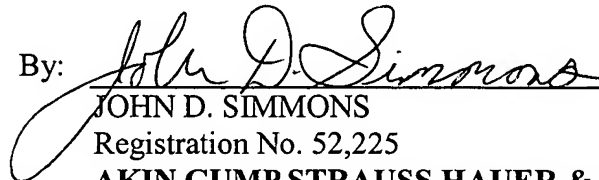
- ☒ Firm check in the amount of \$395.00 is enclosed herewith.
- ☒ The Commissioner is hereby authorized to charge and/or credit Deposit Account No. 50-1017 (Billing No. 200383.0012) as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee(s).
- ☐ RCE fee in the amount of \$____.00.
- ☐ Extension fee in the amount of \$____.00.
- ☐ Additional claim fee(s) in the amount of \$____.00 as calculated above.
- ☒ Any additional fees required under 37 C.F.R. §§ 1.16 or 1.17.
- ☒ In the event that a Petition for Extension of Time is required, but not enclosed, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

Respectfully submitted,

WILLIAM T. GURNEE *et al.*

December 14, 2005
(Date)

By:


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Enclosures